PTO/SB/22 (10-00)
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Under the	Paperwork Reduction Act of 19	95, no persons are required to respond to a collecti	Docket	Number (Optional)	OME CONTROL HUMBER	
PETITION FOR EXTENSION OF TIME UNDER 37 CRF 1.136(a) 021149-000001						
		In re Application of: Guenther Eissner,	et al.			
		Application Number 10/516,381	er 10/516,381 Filed June 10, 200			
		Title: Method for Protection of Endothelial and Epithelial Cells During Chemotherapy				
		Group Art Unit 1635			xaminer Amy Hudson Bowman	
This is a a reply i	request under the provision the above identified appl	ons of 37 CFR 1.136(a) to extend the period ication.	for filing			
The requested extension and appropriate non-small-entity fee are as follows (check time period desired):						
x One month (37 CFR 1.17(a)(1)) \$					\$ 120.00	
Two months (37 CFR 1.17(a)(2)) \$					\$	
Three months (37 CFR 1.17(a)(3))					\$	
Four months (37 CFR 1.17(a)(4))					\$	
Five months (37 CFR 1.17(a)(5))					\$	
x	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 60.00					
X	X Payment by Electronic Funds Transfer.					
	Payment by credit card. Form PTO-2038 is attached.					
	The Commissioner has already been authorized to charge fees in this application to a Deposit Account.					
The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number13-4365 I have enclosed a duplicate copy of this sheet.						
I am t	he applicant/in	ventor				
	assignee of Stateme	record of the entire interest. See 37 CRF 3. ent under 37 CFR 3.73(b) is enclosed. (Forn	71. n PTO/SB/9	96).		
	X attorney or	agent of record.				
	attorney or Registra	agent under 37 CFR 1.34(a). ition number if acting under 37 CFR 1.34(a).		•		
WARN form.	NING: Information on the Provide credit card info	nis form may become public. Credit can ormation and authorization on PTO-203	d informati 8.	tion should not be inc	luded on this	
	October 19, 2007			Jennifer L. Skord Typed or Printed Name		
NOTE: S	Date Signatures of all the inventor	ors or assignees of record of the entire inter	est or their	••		
multiple	forms if more than one sig	nature is required. See below. forms are submitted.				
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Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.